

BEFORE THE ARIZONA VETERINARY MEDICAL EXAMINING BOARD

IN THE MATTER OF:) CASE No.: 22-64
SHAWNA WOOD, DVM)
HOLDER OF LICENSE No. 7628) CONSENT AGREEMENT
FOR THE PRACTICE OF VETERINARY) FINDINGS OF FACT
MEDICINE IN THE STATE OF ARIZONA,) CONCLUSIONS OF LAW
RESPONDENT.) AND ORDER

In the interest of a prompt and judicious settlement of the above captioned matter before the Arizona State Veterinary Medical Examining Board ("Board") and consistent with the public interest, statutory requirements and responsibilities of the Board, and pursuant to A.R.S. §32-2201 et. seq. and A.R.S. § 41-1092.07 (F)(5), the undersigned party, Shawna Wood, DVM ("Respondent"), holder of license No. 7628 for the practice of veterinary medicine in Arizona and the Board enter into this Consent Agreement, Findings of Fact, Conclusion of Law and Order ("Consent Agreement") as final disposition of this matter.

CONSENT AGREEMENT

Respondent understands and agrees that:

1. The Board has jurisdiction over Respondent and the subject matter pursuant to A.R.S. §32-2201, et. seq.

2. Respondent has the right to consult with an attorney prior to entering into this Consent Agreement. Respondent has a right to a public hearing

1 concerning this case. She further acknowledges that at such hearing she could
2 present evidence and cross-examine witnesses. Respondent irrevocably waives
3 her right to such a hearing.

4 3. Respondent irrevocably waives any right to rehearing or review or to any
5 judicial review or any other appeal of these matters.

6 4. The Consent Agreement, once approved by the Board and signed by the
7 Respondent, shall constitute a public record, which may be disseminated as a
8 formal action of the Board. Sufficient evidence exists for the Board to make the
9 Findings of Fact and Conclusions of Law set forth in the Consent Agreement.

10 5. Respondent acknowledges and understands that this Consent
11 Agreement will not become effective until the Board approves it and it is signed
12 by the Board's Executive Director. Respondent acknowledges and agrees that
13 upon signing and returning this Consent Agreement to the Board's Executive
14 Director, Respondent may not revoke her acceptance of the Consent
15 Agreement or make any modifications to the document, regardless of whether
16 the Consent Agreement has been issued by the Executive Director.

17 6. If any part of the Consent Agreement is later declared void or otherwise
18 unenforceable, the remainder of the Order in its entirety shall remain in force
19 and effect.

20 7. Respondent acknowledges that any violation of this Consent Agreement
21 constitutes unprofessional conduct pursuant to A.R.S. § 32-2232 and may result
22 in disciplinary action pursuant to A.R.S. § 32-2234.

23 8. This Consent Agreement and Order is effective on the date signed by the
24 Board.
25

1
2 DATED this 2nd day of August 2022.

3
4 
5 Shawna Wood, DVM

6 **FINDINGS OF FACT**

7 1. The Board is the duly constituted authority for the regulation and control of
8 the practice of veterinary medicine in the State of Arizona.

9 2. Respondent holds license No. 7628 for the practice of veterinary medicine
10 in the State of Arizona.

11 3. Complainant stated that she hired Ms. April Vernon for the boarding,
12 care, riding and selling of her three horses. In August, Ms. Vernon
13 recommended "Taxi," an 11-year-old Appendix gelding be evaluated by
14 Legacy Veterinary Services – prior to this recommendation, Ms. Vernon had
15 reported the horses were doing great.

16 4. On August 1, 2021, Ms. Vernon advised Complainant that the horse threw
17 a shoe and was ready to be shod. Complainant explained that the horse
18 required specific and special shoeing. At her insistence, Ms. Vernon spoke to
19 Complainant's farrier and assured her that all of the farrier's directions would be
20 followed and executed. Afterwards, Ms. Vernon told Complainant that the
21 horse was shod exactly as the farrier had directed; Complainant stated that this
22 did not happen.

23 5. Complainant's farrier evaluated the horse two weeks later and confirmed
24 that the horse's feet were about an inch too short and extremely upright,
25 putting him at severe risk for laminitis and other lameness issues.

1 6. On August 11, 2021, after Ms. Vernon had her farrier shoe the horse, Ms.
2 Vernon notified Complainant that the horse was having difficulties going to the
3 left and other possible lameness problems. At this point, Complainant agreed
4 to have Dr. Carner from Legacy Veterinary Services conduct a lameness exam.
5 She was assured, as requested, that she would be contacted during and after
6 the exam to speak with Dr. Carner. This did not happen.

7 7. On August 18, 2021, Dr. Wood, Dr. Carner's new associate veterinarian,
8 evaluated the horse. Dr. Wood stated in her narrative that she was new to
9 lameness evaluations on her own and Dr. Carner said she would be there to
10 help her as needed and go through anything she may find. Ms. Vernon brought
11 the horse to Dr. Wood. Dr. Wood admitted in her narrative that she should have
12 called Complainant prior to the examination. She had assumed, since Ms.
13 Vernon was the trainer and had worked with the premises before, that they
14 had the permission for the examination and diagnostics, or sedation as
15 needed.

16 8. Ms. Vernon reported to Dr. Wood that the horse was refusing to go to the
17 left and bracing against the bit when going to the left. The horse was seen by
18 another veterinarian 5 years ago for a pre-purchase exam – no lameness issues
19 were seen in the past.

20 9. Upon exam, the horse had a weight ~ 1250 pounds, a temperature = 99.8
21 degrees, a heart rate = 42bpm, and a respiration rate = 18rpm. Dr. Wood noted
22 the horse was resistant to flexion and extension of both stifles. When standing,
23 the right hind was slightly abducted at the stifle. In circles, both to the left and
24 right, the horse was short strided bilaterally. The left pelvis appeared to drop
25 whereas the right pelvis had minimal range of motion. There was thick scarring

1 over the superficial and deep digital flexor tendon bodies in the right hind
2 midway below the hock and above the fetlock. At palpation of the scar, the
3 horse reacted with withdrawal of the limb.

4 10. Due to the horse not standing quietly, he was sedated with detomidine
5 3mg IV for the safety of Dr. Wood and staff. Dr. Wood stated that in hindsight,
6 she should have contacted Complainant with her findings and obtained
7 permission to sedate the horse and perform an ultrasound. Dr. Wood did not
8 document the sedative in the medical record.

9 11. On brief ultrasound of the right hind, there was scarring and adhesions of
10 the superficial and deep digital flexor tendons. Images were unable to be
11 captured. There was no evident front end lameness although the front end was
12 not examined thoroughly beyond palpation due to the glaring nature of the
13 hind end lameness. No neurologic exam was conducted therefore a
14 neurologic cause could not be ruled out.

15 12. Dr. Wood stated in her narrative that she attempted to ultrasound the
16 horse further but Ms. Vernon became impatient with the horse not standing
17 quietly, said they got the view that was needed, and walked away with the
18 horse.

19 13. Dr. Wood documented in the medical record that stifle soreness was not
20 further diagnosed. There was evident weakness and laxity in the right patellar
21 ligaments, most noticeable at gait transitions. Hock potential stiffness may be
22 more a function of proximal soreness in the stifles/higher or distal soreness in the
23 scarred tendons. Dr. Wood further recorded that she recommended further
24 work-up/radiographs of the hocks and stifles minimally to determine what might
25 be needed to be done to treat and/or relieve soreness. Due to the scarring, it

1 was not recommended to use the horse as a performance barrel horse as he
2 was at risk of tearing his tendons under severe strain. The horse would make a
3 great trail horse with pain management and maintenance care.

4 14. Dr. Wood called Complainant with her findings. Complainant was
5 surprised that Dr. Wood examined the horse, not Dr. Carner as she was originally
6 told. She was advised that the horse had sore stifles and other sore areas, which
7 were all due to the scar which resulted in adhesions on the left hind leg. Dr.
8 Wood explained that the ultrasound of the scar area showed adhesions
9 between the two tendons and they were healed together. She was told that
10 the horse would not make a good barrel horse and could possibly be used as a
11 trail horse if she had the recommended therapies performed. According to
12 Complainant, Dr. Wood recommended various therapies such as ozone and
13 electro-equiscope – which Ms. Vernon would provide. Complainant had never
14 heard of these therapies. Dr. Wood and Ms. Vernon advised Complainant that
15 she could get a copy of the ultrasound images.

16 15. Complainant advised Dr. Wood that she would be taking the horse to
17 see another veterinarian for a second opinion as the horse had not had issues
18 from the scar previously and other veterinarians concluded that the scar was
19 cosmetic only. She was assured that she would get a copy of the report and
20 images in time for the second opinion.

21 16. On August 20, 2021, Complainant called Legacy Veterinary Services to
22 request that they send the horse's medical record and ultrasound images
23 directly to her veterinarian as she was headed over there at that time. The
24 receptionist advised Complainant that the ultrasound was limited and images
25 could not be saved because the horse had been too fidgety and would not

stand still. Additionally, the medical records could not be released until Complainant paid for the services.

17. Later that day, the horse was evaluated by Dr. Meyer for a second opinion for lameness. He noted the horse had a grade 1/5 lameness in the left front limb when trotted on firm ground in a straight line, and 2/5 lameness in the left front limb in a left circle and sound in a right circle. The distal left front limb was held in flexion for 60 seconds then the horse's lameness increased to 3/5 on firm ground in a straight line. There was nothing apparent for the cause of lameness.

18. Dr. Meyer discussed with Complainant the scar on the right hind, planter surface of the cannon bone, directly over the flexion tendons. He noted that the scar was old, no heat or swelling was present, and the tendons palpated within normal limits. Dr. Meyer recommended ultrasound of the area if the horse became sore in the right hind limb or if heat or swelling became evident.

19. Dr. Meyer blocked the left front foot with lidocaine and the procedure corrected the left front lameness. It was then noted that the horse was mildly off in the left hind limb. Complainant elected to have the horse trimmed and shod to correct the left front lameness and have both tarsus injected with a corticosteroid. Two radiographs were taken and the left hock was found to have arthritis in the proximal, distal and tarso-metatarsal joints. The right tarsus radiographic findings were in an equal state of arthritic disease. Dr. Meyer was not concerned about the old scar on the right hind limb.

20. On August 27, 2021, Complainant paid for the services provided by Dr. Wood and requested a copy of the medical records. Later that day, Dr. Carner called Complainant. Dr. Carner explained the real reason there were no

1 ultrasound images was because she had not set up with the software company
2 to get images uploaded into a cloud system and she did not know how to
3 email images yet. She further explained that the horse was sedated during the
4 ultrasound exam and was not too fidgety but that they still did not get images
5 to send to her.

6 21. Complainant was upset that she was never informed, nor gave her
7 permission to sedate the horse. The sedation was not documented in the
8 medical record. Additionally, Dr. Wood noted in the medical record that EPM
9 was a concern. Complainant stated that she was extremely concerned that
10 this was a possible issue as she had the horse seen on a regular basis for regular
11 checks and EPM was never a concern. The horse had never been around
12 horses with EPM. Furthermore, if Dr. Wood had suspected EPM was a possible
13 concern, she should have discussed with Complainant further work-up and
14 treatment.

15 CONCLUSIONS OF LAW

16 22. The Findings of Fact constitutes a violation of **A.R.S. § 32-2232 (21)** as it
17 relates to **A.A.C. R3-11-502 (L) (7)** for failure to document in the animal's
18 medical record the sedation that was administered to the horse.

19 ORDER

20 Based upon the foregoing Findings of Fact and Conclusions of Law it is
21 **ORDERED** that Respondent's License, No. 7628 be placed on **PROBATION** for a
22 period of **one (1) year**, subject to the following terms and conditions that shall
23 be completed within the Probationary period. These requirements include **three**
24 **(3) total hours of continuing education** (CE) detailed below:
25

1 1. In addition to the continuing education requirements of AAC R3-11-401
2 (A), Respondent shall complete **three (3) hours of continuing education in**
3 **medical record keeping**. All required CE shall be pre-approved by the Board.
4 Within sixty (60) days of the effective date of the Consent Agreement,
5 Respondent shall submit to the Board for its approval a written outline on how
6 she plans to satisfy the CE requirements. The outline shall include CE course
7 details including, **name, provider, date(s), hours of CE to be earned, and a brief**
8 **course summary**.

9 2. Prior to the end of the Probationary period, Respondent shall submit to
10 the Board a certificate of completion of the CE outlined in the CE plan that has
11 been approved by the Board.

12 3. Respondent shall obey all federal, state and local laws/rules governing
13 the practice of veterinary medicine in this state.

14 4. Respondent shall bear all costs of complying with this Consent
15 Agreement.

16 5. This Consent Agreement is conclusive evidence of the matters
17 described and may be considered by the Board in determining an appropriate
18 sanction in the event a subsequent violation occurs. In the event Respondent
19 violates any term of this Consent Agreement, the Board may, after opportunity
20 for Informal Interview or Formal Hearing, take any other appropriate disciplinary
21 action authorized by law, including suspension or revocation of Respondent's
22 license.

23
24 ISSUED THIS 29th DAY OF August, 2022.

25 FOR THE BOARD:
ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD

Jessica Creager
Chairperson

By 
Victoria Whitmore, Executive Director

Original of the foregoing filed
This 29th day of August 2022 with:


Arizona State Veterinary Medical Examining Board
1740 W. Adams St, Ste. 4600
Phoenix, Arizona 85007

Copy of the foregoing mailed by Certified, return receipt mail
This 29th day of August, 2022 to:

Shawna Wood, DVM
Address on file
Respondent

Copy of the foregoing sent by regular mail
this 29th day of August, 2022 to:

Charles Hover, III, Esq.
Chelle Law
5425 E. Bell Rd, Ste. 107
Scottsdale, Arizona 85254

By: 
Victoria Whitmore, Executive Director